

AMENDMENTS TO THE CLAIMS:

1. (Canceled)

2. (Canceled)

3. (Canceled)

4. (Canceled)

5. (Canceled)

6. (Canceled)

7. (Canceled)

8. (Canceled)

9. (Canceled)

10. (Canceled)

11. (Previously Presented) Method of delivering inhalant to and monitoring exhaled fluid from a patient comprising:

inserting to a first depth a distal end of a first cannula in, for delivering a fluid into, a nostril of the patient; and

inserting to a second depth a distal end of a second cannula in, for sampling exhaled fluid from, the nostril,

wherein said first and second cannulae being disposed adjacent each other, and a predefined length of said first cannula being disposed substantially separate and independent

from a predefined length of said adjacently disposed second cannula, such that upon insertion into the patient's nostril, said predefined lengths of each cannula being allowed to substantially separately and independently conform to internal contours of the patient's nostril and air passage, and said predefined lengths of each cannula being substantially separately and independently disposable in contact with the internal contours of the patient's nostril and air passage.

12. (Original) Method of claim 11, wherein the first depth and second depth range up to 3 cm.

13. (Original) Method of claim 11, wherein the second depth equals or exceeds the first depth.

14. (Original) Method of claim 11, further comprising, prior to one or both of said inserting to a first depth and said inserting to a second depth, providing one or both of the distal end of the first cannula and the distal end of the second cannula with: an aperture, a perforated zone, a rounded contour, an anesthetic coating or combinations thereof.